Case 10-09016-LT13 Filed 06/09/10 Doc 19 Pg. 1 of 11

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF CALIFORNIA

SOUTHERN DIS	SIRICIOFOR	Eli Oldur		Chapter 13	Plan (Recommer	nded Form)
In Re: Alici	a M Arm	endarjz	-	Case Num	nber: <u>/0-09</u> 0	0/6-13
		LOI	TER ED DGE D DEIV ED	1		tachment behind this page
THE FULL AMOUINTEREST RATE 1. Plan Pay	NT OF YOUR CLAIM ON YOUR CLAIM SOU BY RP ments. There sha	IM, SETTING THE ERK, U.S. BANK ITHERN DISTRIC	EVALUE OF THE C RUPTCY COURT T OF CALIFORNIA DEPL hapter 13 Trustee the installments as ago	JTY ne amount of reed upon with	See page 1	CONFIRMATION OF THIS PLAN FOR PAYMENT OF LESS THAN AIM, AND SETTING THE A B 5 each month by debtor(s), or ent of all existing debts of debtor(s) tays of filing the petition or se and agree to pay sufficient funds
conversion order. to the Trustee on	Debtor(s) submit a or before five years	Il future income to from commencer	nent of this case to	fully complete t	his Plan.	See made debtor will immediately
provide trustee ev	vidence of the paym	dains unless the	re is a court order o	r specific writte	n direction from the ca) are made, debtor will immediately each payment. Trustee is under no aimant.
3. Administra	ative Claims. Tru	stee will pay allow	ved administrative di	aims and expe	nses in full pursuant i	9 9 1020(0) 02 001 101
((A). Trustees Fees:	The Chapter 13	Trustee shall receiv			ent, the percentage of which is set by
			's attorney shall be p	oaid after credit	ors listed in paragraph	7 except as checked below:
NA	At	tomey fees to be ssary).	paid in full prior to o	ther claims. (Do	not check this option	if lease payments/adequate protection to other claims. (If no amount is filled
	At At Italy	ttomey fees to be	paid at the rate of \$ sted in paragraph 7)).		
	(C). Except as order claims. All other c	ered by the court, laims entitled to p	other §1326(b) clair riority and post petities on his discretion of	ns will be paid i ion claims allov leems appropri	ate, unless this plan s	by the trustee in advance of other id in full by deferred payments in such pecifically provides otherwise.
Specified named creditors	d Leases, Persona	l Property (Trust	ee to pay). Debtor	(s) elect to ass	ume the existing lease	of personal property with the seren
(A). REG	ULAR LEASE PAYI	orrovision shall t	e paid by debtor(s)	directly.		istribution to named lease creditors in wed. Any option to purchase or
	EARS LEASE PAYN the installment spo	MENTS: After the ecified from funds		norment ab	ove, trustee shall pay d in the amount allowe	any lease arrears to named lease ed.
Name o	f Creditor	JA	Regular Monthly Payment Install	y ment	Estimated Arrears	Arrears Installment
						

Case 10-09016-LT13 Filed 06/09/10 Doc 19 Pg. 2 of 11

Prepared for the UNITED STATES BANKRUPTEY COURT SOUTHERN DISTRICT OF CALIFORNIA

Chapter 13 Plan

Debtor: Olivin Ormand

In Re: Alicia M Armendariz

Case Number: 10-09016-13

June 9, 2010

Explanation: I, Alicia Armendariz and Brian Armendariz, have attempted to pay JPMORGAN CHASE BANK, CHASE HOME FINANCE, LLC, or CALIFORNIA RECONVEYANCE with a Promissory Note, which COPY is attached to this page. Our escrow agent is holding the Note in escrow, and they have not responded and have refused our offer to date. My husband, Brian Armendariz, has filed a Security Agreement under the UCC-1 Financing statement in the State of California, Filing No. 08-7164793196 It is recorded with the county of San Diego and the Secretary of State. He has secured the property. We both want to settle the matter and are willing to pay for the property once again.

In my Chapter 13 plan there are 2 options for proceeding with payments to the creditors:

OPTION 1: David L. Skelton as fiduciary for Alicia Armendariz and/or Brian Armendariz will handle the full and complete payments of all creditors working with JPMORGAN CHASE by accessing Brian's treasury to settle all creditor accounts.

OPTION 2: Continue with the Bankruptcy through ADVERSARIAL PROCEEDINGS in a Bankruptcy Court of Record to settle all creditor accounts.

Plan Dated:

Page 1A of 5

NEGOTIABLE

INTERNATIONAL PROMISSORY NOTE (UNCITRAL CONVENTION)

NEGOTIABLE

Note Number: PN-090519589904BAA

Pay to the

Order- JPMORGAN CHASE BANK, NA, CHASE HOME FINANCE, LLC, or CALIFORNIA RECONVEYANCE CO.

\$ 530,000.00 USD

Date: May 10, 2010

FIVE HUNDRED THIRTY THOUSAND AND 00/100

**** DOLLARS

Exempt Priority Pre-Paid Account # F32686047

This instrument is an UNCONDITIONAL INTERNATIONAL PROMISSORY NOTE (UNCITRAL CONVENTION) tendered by the Undersigned Respondent, Brian Anthony Armendariz©, Authorized Representative, hereinafter "Maker," in good faith, and in accordance with law, as codified at Articles 1-7, Articles 11, 12, 13, 14(1), Articles 46(3) and Article 47-4(c). and Public Policy at House Joint Resolution 192 of June 5, 1933, as full satisfaction of a alleged debt claimed and allegedly owed in favor of Payee herein, i.e. CHASE HOME FINANCE, LLC, d.b.a. a debt collector, as per Payee's/Debt Collector's Presentment:

On this 10th day of May I0 2010, I, BRIAN ANTHONY ARMENDARIZ©, By this negotiable instrument governed by UNCITRAL CONVENTION, promise to Pay to JPMORGAN CHASE BANK, CHASE HOME F ANCE, LLC, or CALIFORNIA RECONVEYANCE COMPANY \$530,000.00 USD without interest or other charges, Payable demand upon presentment of this original instrument properly endorsed on or after May 10, 2010 AD, at 270 Park Avenue, Floor New York, New York 10017. Alleged Creditor: CHASE HOME FINANCE, LLC, Alleged Account No.: 67881226, \$15000 AD, at 270 Perk Avenue, Floor New York, New York 10017. Alleged Creditor: CHASE HOME FINANCE, LLC, Alleged Account No.: 67881226, \$15000 AD, at 270 Perk Avenue, Floor New York, New York 10017. Alleged Creditor: CHASE HOME FINANCE, LLC, Alleged Account No.: 67881226, \$15000 AD, at 270 Perk Avenue, Floor New York, New York 10017.

As an operation of law, Payee/Debt Collector tacitly consents and great at there is accord and satisfaction by use of this instrument for satisfying Payee's/Debt Collector's claim and Makers nereby of larged from liability on this alleged account and the obligation is suspended in pursuant to UNCITRAL CONVENTION codified. Articles 1-7, Articles 11, 12, 13, 14(1), Articles 46(3) and Article 47-4(c).

and the

BRIAN ANTHONY ARMENDARIZ©TRUST

	. 20
By, Brian Anthony Armendariz, Maker "As good as Aval" Authorized Representative Secured Party CUSIP #556119904; Prepaid Account No. F32686047	y, William Recourse UCC 1-308
Private Set off Account Number: BRIAN ANTI-COLY ARMEND	
Witness	Witness
Authorized person indorse beaw. Print name and official title when	en presenting this Instrument for payment. Government-issued ID with
	state-issued Drivers License; state-issued Identification Card; Passport.
Printed Name of Indorser	Form of Photo Identification
Official Title of Indorser	Form of Official Identification
Date of Presentment and Indorsement	Signature of Indorser
	Right Thumb Print
	Date:

Respondent's Private International Administrative Remedy Demand No. PN-090519589904BAA

Registered Number for US Department of the Treasury: RA 087 680 998 US

Registered Number for Federal Reserve Bank: RA 087 681 004 US

Registered Number for Office of Comptroller of Currency: RA 087 681 018 US

Case 10-09016-LT13 Filed 06/09/10 .Doc 19 Pg. 4 of 11

Case Number: 10-09016-13

ision will be binding, e	A	13 1101 000 1	installment	ate set forth and payment pursuant to this y objects and the court orders otherwise. (Optional) % Interest
Name of Creditor	NIA	Allowed Secured Value	instanine it	
	- _			
				
	<u>-</u> -			
chased for personal uned in this paragraph sh	all be paid in the	e same priority as creditors list is not applicable. Each name	ed in paragraph 5 above bu d creditor shall be paid in in	money security interest in vehicles one year of filing the petition). Creditors at in full for allowed claims secured solely by stallments from funds available for distribution reent (7%) per annum unless a different ess creditor timely objects and the court
centage is specified be- lers otherwise.				(Optional) % Interest
me of Creditor	NIA	Estimated Claim	Installment	(0)
efined by §507(a)(1), st	all be paid, as to available for di entage is specific graph 3 of this p	stribution monthly, non-cumula ed below. Holders of claims fol lan. Post-petition support sha	tive, as indicated until claim r domestic support obligatio Il be paid by the debtor dire	claims for a domestic support obligation as case, in full 100% to those creditors named be a spaid in amount allowed without interest unless, other than creditors specifically named will city to support creditors as such payments (Optional) % Interest
Name of Creditor	NIA	Estimated Arrears	Installment	(Opadial)
				w ha and
				le income for a period of five years will be app
to make payments unce §507(a)(1)(B). Although	the unpaid DSC	filed and allowed claims in inst	ter creditors provided for in tallments from funds availal	le income for a period of the property of the prior paragraphs, debtor proposes to pay the prior paragraphs, debtor proposes to pay the ble for distribution monthly, non-cumulative, at plan for distribution to creditors. If there are a any creditor in this paragraph whose claim is

Case Number: 10-09016-13

Secured Co-debtor claims. A aragraph who have allowed claims sect lowed plus interest at the contract rate vailable for distribution monthly non-cur if none specified, pay 12% A. P. R. interests.	ured by personal p (if clearly specified mulative. If no conterest.	operty with a co-debien me	indicated Installments	are to be paid from funds
Name of Creditor	NIA	installment	(Optional) % Inter	est
Real Estate or Mobile Homes (I offlowing completion of this case, debtorous completion of this case, debtorous comments supporting non-voidable fies named lien holders (their agents and cumulative, and except for creditors paid and cach named creditor shall be paid in instantum, unless a different percentage is	rs snall make the consist spainst debtor's assigns) shall be a prior of the prior stallments indicate	s real estate or mobile hom paid in installments by Trus	e, directly to lien holders in a tee from funds available for o	current manner. However, arrears fistribution monthly, non-indic distribution to other creditors.
Provisions of this paragraph shall open thereof, or by the laws or processes of with by this plan holding statutory or oth exercise of power of acceleration for fa said creditor in full on or before six mon in the plan, secured tax claims shall be	ate to cure any def a governmental un ner liens against de liure to make insta	ebtor's real estate or mobile	home and the obligation is f e Court orders otherwise, det this Plan Unless otherwise	ully due, for reasons other than the otor(s) will pay said claim directly to specifically provided for elsewhere
	1A	Estimated Arrears	installment	(Optional) % Interest
(their agents and assigns) who have so collateralized shall be paid in installmore pursuant to prior paragraphs of this planed to prior paragraphs of this planed in installments a	ecunty agreement ents by Trustee fro an shall be paid or is indicated until th	m funds available for distri	bution monthly, non-cumulativ	to other creditors. Each named
a different percentage is specified bell Name of Creditor	NA	Estimated Claim	Installment	(Optional) % interest

Case Number: 10-09016-13

nolders of other claims allowed secured solely of filed and allowed claim, unless specifically dealth paragraph shall be paid pro-rata with other such percentage is specified below and in advance of	with elsewhere in this p creditors to the amount distribution to general	
NIA	(Ontional) % interest	
12. Unsecured co-debtor claims. After par paragraph who have allowed unsecured claims interest at the contract rate (if clearly specified in distribution monthly non-cumulative. If no contract rate (if clearly specified in distribution monthly non-cumulative.)	yments provided for by with a co-debtor liable to the claim) in installme act rate of interest is cla	prior paragraphs, creditors (their agents and assigns) named in this thereon, shall be paid by the trustee 100% of the claim as allowed plus ents as indicated. Installments are to be paid from funds available for early specified in the claim, pay the interest rate specified below or if none
Name of Creditor W/A	installment	(Optional) % Interest
daims allowed unsecured. Unsecured not epi-	Office Comments with 1995	
exempt assets or (2) the applicable commitme percentage and dollar amount are left blank, to amount to unsecured creditors. If the percentage the percentage if necessary to comply with the	nt period of 36 of 60 mustee is to pay 100% to age is filled in at less the required applicable co	
14. Special Unsecured Claims. Notwith:	standing any other prov amount allowed [Debto	rision of the plan, creditors named in this paragraph shall be paid as an rs represent compliance with section §1322(b)(1)].
Name of Creditor	NA	Optional interest rate
15. Exclusion of creditor. Notwithstand creditors in this paragraph. These named creditor to listed creditors, including defaults, sha opportunity to object by Debtor.	ill be disallowed as clai	of the plan, debtor(s) elect to assume the existing lease or contract with it with or provided for by this plan. All pre-petition and post-petition payments ms for payment herein, unless agreed upon by the Trustee with notice and an
Name of Creditor	W/A 	Collateral

Case Number: 10-69016-13

Name of Creditor	interest in said property. W/A	Collateral
	d for part patition debts incurred by debtori	(s) may be paid in full 100% of the claim in such order and ersely affected party in interest may file to dismiss case if
Post-Petition Claims. Claims allowed such terms as the Trustee, in his sole discreptor(s) incur post-petition debts without the rent.	retion, may determine. Trustee or any adversion, may determine. Trustee or any adversion written consent of Trustee and debtor(s) fa	(s) may be paid in fail 100% of the file to dismiss case if ersely affected party in interest may file to dismiss case if all to make sufficient payments to keep such obligations
withstanding 61377 ADV remaining junes	amings while this case is pending shall rem held by the Trustee after dismissal or conv to §1322(b)(3), Trustee shall have the pow to Trustee under this Plan. Any tax refund s) account and disbursed to creditors pursu	nain property of the estate and shall not vest in the debtor version of a confirmed case may be distributed to creditors er to waive, in writing and on such conditions as the Trustee is or other funds sent to the debtor(s) in care of the Trustee uant to the plan.
	NA	
		2005 except as to any added paragraph
		o long from the recommended plan dated 9/05.
pecial Note: This plan is intended as an e fter paragraph 18 above. The trustee shall	be note national to	
Rer paragraph 18 above. The trustee shall	be note national to	Viva amore
efter paragraph 18 above. The trustee shall	Debtor:	
Special Note: This plan is intended as an earter paragraph 18 above. The trustee shall Plan Dated:	Debtor:	Olivin amend

Form 56
(Rev. December 2007)
Department of the Treasury
Internal Revenue Service

Notice Concerning Fiduciary Relationship

(Internal Revenue Code sections 6036 and 6903)

OMB No. 1545-0013

Part I	Identification		
Name of p	erson for whom you are acting (as shown on the tax return)	Identifying number	Decedent's social security no
ALICIA	MORA ARMENDARIZ	560060473	
Address o	person for whom you are acting (number, street, and room or suite no.)		
1072 D	arwin Drive		
City or tov	n, state, and ZIP code (If a foreign address, see instructions.)		
	ide, CA 92056		
Fiduciary's			
	Skelton		
	fiduciary (number, street, and room or suite no.)		
	t., Suite 1430 n. state, and ZIP code	Telephone number	er (ontional)
•	go, CA 92101-4507	(619)	338-4006
Part II		1 \ 0.00 /	330 4300
1 Au	hority for fiduciary relationship. Check applicable box:		
	Will and codicils or court order appointing fiduciary	• •	h
	Court order appointing fiduciary	(2) Date (see ins	structions)
	 Valid trust instrument and amendments Other. Describe ► ALL COMMERCIAL TRANSACTIONS AS DIRECT 	ED	
Part II	Nature of Liability and Tax Notices		
3 Fed4 Yea5 If the des6 If the of the second res	the of tax (estate, gift, generation-skipping transfer, income, excise, etc.) ► Alleral tax form number (706, 1040, 1041, 1120, etc.) ► Alleral tax form number (706, 1040, 1041, 1120, etc.) ► Alleral tax form number (706, 1040, 1041, 1120, etc.) ► Alleral tax form number (706, 1040, 1041) ► From 07/DEC/1955 to present form of the fiduciary listed in Part I is the person to whom notices and other written compared to the items described on lines 2, 3, and 4, check here ► □ and list the application of the items described on lines 2, 3, and 4, check here ► □ and list the applicable	esent and following yes communications should communications should be plicable federal tax form	ars thereafter be sent for all items sent for some (but not all) number and the year(s) or
D			
Part IV			
- 0	Section A—Total Revocation or Tern		
Rev Rea	eck this box if you are revoking or terminating all prior notices concerning renue Service for the same tax matters and years or periods covered by this ason for termination of fiduciary relationship. Check applicable box: Court order revoking fiduciary authority Certificate of dissolution or termination of a business entity Other. Describe		
	Section B—Partial Revocation	1	
the b Spe	ack this box if you are revoking earlier notices concerning fiduciary relationshistance tax matters and years or periods covered by this notice concerning fiducity to whom granted, date, and address, including ZIP code.	ips on file with the International internations in the internation in	▶ □
	Section C—Substitute Fiduciar	у	
9 Che spe	ck this box if a new fiduciary or fiduciaries have been or will be substituted cify the name(s) and address(es), including ZIP code(s), of the new fiduciary(d for the revoking or terries)	ninating fiduciary and

Case 10-09016-LT13 Filed 06/09/10 Doc 19 Pg. 9 of 11

Form 56 (R	ev. 12-2007)			<u> </u>	Page 2
Part V	Court and Administrative Proceed	lings			
Name of co	ourt (if other than a court proceeding, identify the type of	f proceeding and name of agency)	Date proceeding	g initiated	
Address of	court		Docket number	of procee	eding
City or tow	n, state, and ZIP code	Date	Time	a.m. p.m.	Place of other proceedings
Part VI	Signature				
Please Sign Here	I certify that I have the authority to execute this notic	e concerning fiduciary relationship on behal Authorized Rep	, •		
1016	Fiduciary's signature	Title, if applicable		Date	

Form **56** (Rev. 12-2007)

Form 56
(Rev. December 2007)
Department of the Treasury
Internal Revenue Service

Notice Concerning Fiduciary Relationship

(Internal Revenue Code sections 6036 and 6903)

OMB No. 1545-0013

Part I	Identification		
Name of perso	on for whom you are acting (as shown on the tax return)	Identifying number	Decedent's social security no
BRIAN AN	ITHONY ARMENDARIZ	556119904	
Address of per	rson for whom you are acting (number, street, and room or suite no.)		
1072 Darw	rin Drive		
City or town, s	state, and ZIP code (If a foreign address, see instructions.)		
	e, CA 92056		
Fiduciary's nar			
David L. S			
	uciary (number, street, and room or suite no.)		
	Suite 1430 state, and ZIP code	Telephone number	er (ontional)
•	o, CA 92101-4507	(619)	338-4006
Part II	Authority	(013)	300-4000
	rity for fiduciary relationship. Check applicable box:		
	Will and codicils or court order appointing fiduciary	• •	h
	Court order appointing fiduciary	(2) Date (see ins	structions)
	/alid trust instrument and amendments Other. Describe ► ALL COMMERCIAL TRANSACTIONS AS DIRECT	'FD	
u w	Juliel. Describe Prime Commence of the Commenc		
Part III	Nature of Liability and Tax Notices		
4 Year(s)5 If the descril6 If the f of the	al tax form number (706, 1040, 1041, 1120, etc.) ► ALL) or period(s) (if estate tax, date of death) ► From 09/MAY/1958 to profiduciary listed in Part I is the person to whom notices and other written bed on lines 2, 3, and 4, check here iduciary listed in Part I is the person to whom notices and other written continuous described on lines 2, 3, and 4, check here ► □ and list the ap (s) applicable	n communications should ommunications should be plicable federal tax form	be sent for all items
Part IV	Revocation or Termination of Notice Section A—Total Revocation or Termination of Notice	mination	
7 Check	this box if you are revoking or terminating all prior notices concerning		n file with the Internal
	ue Service for the same tax matters and years or periods covered by this		
	n for termination of fiduciary relationship. Check applicable box:		
	ourt order revoking fiduciary authority		
	rtificate of dissolution or termination of a business entity her. Describe ▶		
U OII	Section B—Partial Revocation	<u> </u>	
On Ohaale			
	this box if you are revoking earlier notices concerning fiduciary relationsh me tax matters and years or periods covered by this notice concerning fid		al Revenue Service for
	y to whom granted, date, and address, including ZIP code.	dolary relationship	
	, to this granter, date, and addition, modeling in code.		
	Section C—Substitute Fiducial	ry	
specify	this box if a new fiduciary or fiduciaries have been or will be substituted the name(s) and address(es), including ZIP code(s), of the new fiduciary	(ies)	ninating fiduciary and ▶ □

Case 10-09016-LT13 Filed 06/09/10 Doc 19 Pg. 11 of 11

Form 56 (Re	ev. 12-2007)				Page Z
Part V	Court and Administrative Proceeding	s			
Name of co	urt (if other than a court proceeding, identify the type of pro	ceeding and name of agency)	Date proceeding i	initiated	
Address of	court		Docket number of	f procee	ding
City or town, state, and ZIP code		Date	Time	a.m.	Place of other proceedings
Part VI	Signature			P.111.	
Please	I certify that I have the authority to execute this notice cor	ncerning fiduciary relationship on behalf	of the taxpayer.		
Sign Here	\	Authorized Repr	estative		
	Fiduciary's signature	Title, if applicable		Date	

Form **56** (Rev. 12-2007)